

LOS ANGELES COUNTY COMMISSION FOR CHILDREN AND FAMILIES

Dana E. Blackwell Executive Director COMMISSIONERS:
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WENDY L. RAMALLO, ESQ.
SANDRA RUDNICK
ADELINA SORKIN, LCSW/ACSW
DR. HARRIETTE F. WILLIAMS, CHAIR
STACEY F. WINKLER

APPROVED MINUTES

The General Meeting of the Commission for Children and Families was held on Monday, **September 19, 2005**, in room 140 of the Kenneth Hahn Hall of Administration, 500 West Temple Street, Los Angeles. **Please note that these minutes are intended as a summary and not as a verbatim transcription of events at this meeting.**

COMMISSIONERS PRESENT (Quorum Established)

Carol O. Biondi

Hon. Joyce Fahey

Ann E. Franzen

Susan F. Friedman

Helen A. Kleinberg

Dr. La-Doris McClaney

Rev. Cecil L. Murray

Wendy L. Ramallo

Sandra Rudnick

Adelina Sorkin

Dr. Harriette F. Williams

COMMISSIONERS ABSENT (Excused/Unexcused)

Patricia Curry

Daisy Ma

Stacey F. Winkler

APPROVAL OF THE AGENDA

The agenda for the September 19, 2005, meeting was unanimously approved.

APPROVAL OF MINUTES

The minutes of the August 15, 2005, general meeting were unanimously approved.

The minutes of the September 6, 2005, general meeting were unanimously approved.

CONTINUUM OF CARE AND MHSA STRATEGIES

Commissioner Kleinberg reviewed the history of the Family County Community Continuum of Care (FC4) that began with reports produced by the Commission last year on prevention, reunification, and permanency. The team that looked at unifying these reports also borrowed from work done in the early 1990s on the continuum of care and how county government and communities can work together to support families and children.

The document begins with a set of principles for the FC4:

- It is family-focused and strengths-based.
- It uses community-based service delivery.
- It advocates a coordinated and integrated service support system.
- It involves performance-based outcomes and evaluation.

The first graphic page represents the elements necessary for healthy families and strong communities. The second graphics page lays out the core community and county services needed for prevention support (primary), voluntary support and aftercare (secondary), and crisis-mandatory (tertiary) services. The third graphics page shows the specific county departments and agencies involved in each of these categories of service.

What becomes clear in studying the continuum is that each piece must be funded: upfront services to prevent abuse and neglect, voluntary programs for at-risk families, mandated services for families in crisis, and, once families are on their feet again, aftercare to make sure they do not slip into crisis again. What also becomes clear is that the Department of Children and Families cannot do everything—many different services are essential in keeping families functioning. If other systems do not perform efficiently, more children will trickle into the child welfare system. (When asked why court services were not listed in the tertiary category, Commissioner Kleinberg explained that mental health cases involving hospitalization required this level of service, but were not under court jurisdiction.)

Team members have been working on the document for a year, and have presented it to the Children's Planning Council and to the Chief Administrative Office's Service Integration Branch. They have gone to the department's GIS people for help in making the graphic look both more professional and simpler, so that lay people may more easily understand the concepts. Commissioner Kleinberg welcomes input in that regard, and also mentioned that a series of community forums held by the Children's Planning Council had yielded further information that might be incorporated into the FC4 diagrams. There is also some thought about breaking out FC4 into the county's five outcome areas of good health, safety and survival, economic well-being, social and emotional well-being, and achievement and workforce readiness.

Many of the services listed under prevention support (primary) are also listed under voluntary support (secondary), and Commissioner Ramallo asked what the clarifying line was between the two. The prevention work group chaired by Dr. Charles Sophy and Commissioner Rudnick used the analogy of a house: families 'outside the house' need

General Meeting September 19, 2005 Page 3 of 8

the basic social supports that all healthy communities provide, but are not at particular risk for child maltreatment. Families move from 'outside the house' (primary) to 'on the porch' (secondary) when an unsubstantiated report of abuse or neglect is made to the department, increasing risk factors; more intensive voluntary supports are necessary to prevent these families from spiraling into crisis. (At this point, families agree that DCFS is in their lives and supervising their interaction, but the case has not gone to court.) Families 'in the house' (tertiary) are experiencing crisis, and authorities step in to mandate services to ensure children's safety.

Clarifying the differences between these stages will be important, especially if the document is not used simply as an internal county instrument, but gets wide circulation within the general public, perhaps broken out into separate sections. Religious leaders and schools, for instance, could distribute lists of primary prevention resources to their constituents who may need them, while those involved in crisis intervention could make available lists of voluntary resources for secondary prevention. Commissioner Friedman agreed to help with the graphic improvements.

The goal for the FC4 document is to present it to the Board of Supervisors as a model for integrating services in terms of prevention, crisis, and aftercare. With the passage of Proposition 63, the Mental Health Services Act (MHSA), approximately \$250 million a year will be available for mental health services, which are part of the continuum. Initial decisions are being now made about \$45 million in start-up funding—a partial fiscal year's worth—for community services and supports for the most seriously mentally ill. (Future allocation processes will address prevention, early intervention, housing, and training for staff and providers.)

The Department of Mental Health's presentation to the Board of Supervisors on Proposition 63 funding is scheduled for October 11, and the FC4 team has suggested presenting its document to the Board at the same time, as a methodology for spending these new dollars. Team members are reluctant to do so, however, without discussions with DCFS as to how this approach fits in with the Katie A. plan and the department's overall direction. Dr. Sophy said that, following their receipt of the final recommendations from DMH, they would be happy to connect with the Commission to discuss the continuum.

Commissioner Fahey moved that, subject to discussions with the department, the continuum of care concept be presented to the Board of Supervisors in conjunction with the Department of Mental Health piece on Proposition 63. Commissioner McClaney seconded the motion, and it was unanimously approved.

ELECTION OF COMMISSION OFFICERS

Commissioners voted unanimously to elect Commissioner Kleinberg as incoming chair of the Commission. Commissioners Rudnick and Sorkin were elected vice chairs.

HURRICANE STATUS REPORT

Dr. Charles Sophy congratulated Jennifer Lopez, who—after being on the job only six weeks—recently headed a four-person task force to locate Los Angeles County children

General Meeting September 19, 2005 Page 4 of 8

placed in states affected by Hurricane Katrina. Ms. Lopez reported that all 85 children had been located and are safe and unhurt. She believes that their caregivers are also unharmed, though the psychological pain caused by losing everything will need ongoing attention.

Sixteen of the out-of-state cases are finalized adoptions, and the others are relative placements with guardianship or pending adoptions. Task force members concentrated on finding these children through the Red Cross, missing-child websites, mechanisms set up at shelters, communications with case-carrying social workers and children's attorneys in the affected region, and working with officials who administer the interstate compacts that allow the placement of children in 50 states and 27 countries. They also pulled court reports off the CWS/CMS system to ascertain where children may have recently visited relatives, in case they were evacuated to those locations.

Since so many post offices in the region are shut, gift certificates from Wal-Mart, rather than packages of goods, are being distributed to the children. Chair Williams suggested using the children's trust fund, and Vice Chair Biondi noted that the Children's Action Network was coordinating the donations of goods that the children can receive when appropriate. The local Cedars-Sinai mobile medical unit has been dispatched to Houston, and Gwen Bartholomew, an L.A. kinship activist now living in Texas, has been made aware of that.

The interstate compact group plans to prepare early for other predicted storms, making contacts ahead of time, updating information, and getting out-of-area contacts where children may evacuate. Because earthquakes come without warning, Commission Kleinberg urged the department to consider training caregivers about their responsibilities in chaotic circumstances, and asked that the Commission be made aware of those plans.

Commissioner Fahey expressed concern that the department may start removing children because displaced families no longer meet the technical requirements for separate bedrooms or other provisions of the standard home study. She hopes the message will get through that no child will be removed unless there is an actual emergency.

Ms. Lopez will return with three-month and six-month updates on the evacuated children, including a breakdown of their legal status and whether any participated in Kin-Gap.

FAMILY CONFERENCING STRATEGIES

Lisa Parrish, deputy director of the bureau of resources, and Nina Powell McCall, the manager of the family-to-family program, reviewed the various family conferencing strategies in use by the department.

The Annie E. Casey Foundation has awarded grants that have been apportioned to the regional offices to better their relationships with the community. Approaches have included team decision-making, self-evaluation, parent and foster parent training (concentrating on the recruitment and retention of foster parents who are committed to the reunification process), and community involvement.

General Meeting September 19, 2005 Page 5 of 8

With regard to team decision-making (TDM), the Casey model is to use facilitated team meetings with integral family involvement (both immediate and extended) as placement conferences—at all placements into foster care, all re-placements, and all reunifications. The department has broadened that approach as a way to get community members and professionals engaged in decision-making, with the family at the center. (By contrast, family group decision-making—FGDM—has less focus on professional input.)

In 2004, the rollout of point of engagement made TDM mandatory at any decision to open a case with the possibility of detention (and sometimes prior to detention), as well as 30 days afterward, at the creation of the family plan. The department is considering mandating another TDM four months into the case, prior to going back to court, and another at the nine-month mark, convened by a regional administrator, that would decide on reunification or legal guardianship. The early involvement of the family, which may also request meetings, helps the emphasis on quick reunification or, if necessary, concurrent planning when reunification is not possible.

Since last July, the department has conducted over 3,800 TDMs, over 400 FGDMs, and over 250 conferences for emancipating youth who are leaving care.

As more team meetings are becoming mandatory, resource problems are being experienced. Ideally, the same facilitator follows a case throughout its life, but the small number of facilitators in each office sometimes makes that impractical. In addition, because FGDMs are not motivated by crisis, they are longer in duration than TDMs and require lengthy preparation (sometimes up to 30 hours) to get as many extended family members in the room as possible. This means that workers can do at most two per week, as opposed to TDMs, which typically last only a couple of hours. The department is currently looking at records of the FGDMs held during the summer of 2005 to get a better sense of their outcomes, why they are being convened, and what criteria could be used to mandate them (the reduced timelines for children aged three and younger, for example).

The resource-intensive work up front, Commissioner Ramallo said, must be balanced against the long-term savings of fewer disruptive placements. How FGDMs affect workload is one thing, but a bigger picture of child safety, increased permanency, and reduced costs to the county must also be considered. The National Conference of Judges has evaluated similar approaches in other states, and any assessment of time and effort should not focus on internal issues alone.

In general, children's attorneys do not attend FGDMs, though they can be if the family agrees they should. Especially for children too young to be involved themselves, Commissioner Fahey said, the attorney's presence can ensure that critical information is considered.

Regional Permanency Review Teams (RPRTs) also employ a family conferencing strategy for children in longer-term care, and Ms. Parrish said she would check office procedures on RPRTs for youth in Juvenile Hall. With the passage of AB 129, Vice Chair

General Meeting September 19, 2005 Page 6 of 8

Biondi said, linkages becomes even more important, since departmental oversight is required for youth in the 300 system throughout.

A report on the allocation of MacLaren Children's Center funds—\$2 million of which was earmarked for FGDMs for children with multiple placements—originally appeared in Commission packets on September 6, when Dr. Sanders had planned to review it. That information will be part of the director's report on October 3, and will include 2004–2005 data as well as 2003–2004.

Commissioner Kleinberg stated her concern over the small mention of visitation plans within the family-centered team decision-making proposal, and her observation that parents often feel, even as the clock keeps ticking, as if they cannot get the services they need. Ms. Parrish said that the proposal could be revised to better reflect the visitation plans that are created in the team meetings. Regarding services, as the department tries to find accountability measures that also reduce redundancy, a unified service referral form is being developed that will function for family preservation, wraparound, foster care, etc. (She will get a copy of the draft to Ms. Blackwell.) In addition, the main responsibility of the newly created position of intensive services worker is to get the family hooked up with the services they need within the first 30 days, before the case gets transferred from the emergency worker to the long-term worker.

Commissioner Kleinberg would like to see individual outcomes addressed in these meetings, not just broader goals for the whole family. Also, tracking the reasons families enter the system—which overwhelmingly include substance abuse, mental health issues, and domestic violence—could help establish where more concentrated efforts are needed. Ms. Parrish said that though the department does not track data on that level yet, it is crosschecking the characteristics of FGDM families and will commit to doing a qualitative snapshot a couple of times a year.

Ideally, TDMs will lead to FGDMs, as case workers are able to engage families and move to doing more with extended families. According to Ms. Parrish, departmental staff are embracing the TDM concept, though another few months of developing policies around how the two approaches relate can be expected. A decision tree was suggested as a tool to understand the distinctions between the models and when one would be preferred over another. Within the proposal document, making each color refer consistently to a particular approach would also be visually helpful.

HOLLYGROVE UPDATE

Earlier this summer, the board of directors of Hollygrove decided that it would close its Level 12 residential treatment program for children ages 6 to 12 on September 2, choosing to expand its service array by converting to a community service agency. It will retain its foster family agency and outpatient mental health services.

Following that announcement, the department worked closely with Hollygrove staff to place the 48 children occupying those beds. Eight children have been transferred to other Level 12 facilities, nine have gone home to their parents, 11 have gone home to relatives,

General Meeting September 19, 2005 Page 7 of 8

14 went to foster homes, and six went to live with nonrelative Hollygrove staff or volunteers. Of the last group, two have subsequently been transferred to Level 12 facilities, and one has been hospitalized.

Despite these disruptions, the 77 percent of these children who were able to transfer to a home situation leads the department to believe that plenty of younger children are presently in group homes who can, with help, thrive in a lower level of care. Intensive aftercare services are a key component for success. The department is currently drafting an RFQ for an expansion of wraparound services, in which 10 former Hollygrove children are enrolled.

APPRECIATION OF OUTGOING OFFICERS

On behalf of the Board of Supervisors, Supervisor Yvonne Brathwaite Burke commended Chair Williams for the contributions and new dimension she has brought to the Commission, and congratulated her on the conclusion of her term as chair. Supervisor Burke recalled Chair Williams' leadership role within the Los Angeles Unified School District and her rising to the new challenge of Commission membership following her retirement.

On behalf of the Commission, Ms. Blackwell recognized Vice Chair Biondi for her eight years as vice chair, presenting her with a plant and a certificate of appreciation that highlighted her efforts to keep Probation youth at the forefront of the Commission's work.

Ms. Blackwell then presented a gift plant to Chair Williams and thanked her for her leadership and dedication. Commissioner Kleinberg read a poem she had composed, and Ms. Blackwell read a short inspirational piece. Chair Williams expressed her appreciation to all, wishing the incoming chair the best and pledging her support.

CHAIR'S REPORT

- Chair Williams welcomed two new Commissioners: Susan F. Friedman, appointed by the Third District, and Wendy L. Ramallo, appointed by the First District.
- The Commission's annual retreat will be held on Monday, November 7, 2005, at the home of Commissioner Winkler. Recommendations for the retreat agenda should go to the incoming chair.
- Chair Williams and Dana Blackwell interviewed three candidates for the youth representative seats on the Commission, and the two youth chosen will attend their first meeting on October 17.
- The Commission's sunset report is due on October 3 to the Executive Office; Ms. Blackwell will work with both the outgoing and the incoming chairs to complete this report.
- The Mental Health Commission will hold a public hearing on Proposition 63, the Mental Health Services Act (MHSA), tomorrow from 5:00 to 8:30 p.m. at the cathe-

General Meeting September 19, 2005 Page 8 of 8

dral conference center. Chair Williams encouraged Commissioners to attend for ideas about how a county commission can outreach to the public.

- The scorecard report from the Children's Planning Council on the three work group reports was mailed to Commissioners last week; if it was not received, Ms. Blackwell will re-send.
- Several projects are underway as Chair Williams transitions out of her office, including a Commission brochure, a proposed website, and an annual report.
- The new Kinship Division has acquired a Division Chief, Michael Gray; the Deputy
 in charge from administration is Angela Carter. Any subcommittee of the
 Commission must have at least three Commissioners participating on it, and Chair
 Williams has been the only one attending kinship meetings for four or five months.
 Two additional Commissioners are needed to make a commitment to working for
 kinship families.
- Commissioner Murray reported on the meeting held with three Commissioners and David Sanders around quality-of-life issues, at which Dr. Sanders indicated that he would appreciate some time with Commissioners brainstorming around questions of bureaucracy, authority, and the direction of the department. The upcoming retreat would seem to be a good opportunity for an informal talk, and Dr. Sanders will be asked about his availability on November 7.

PUBLIC COMMENT

There was no public comment.

MEETING ADJOURNED